PTO/SB/22 (05-03)
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ework Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  Docket Number (Optional) 00537/163002
In re Application of CAWTHORNE, 園T AL.
Application Number 09/423,683 Filed 03/20/2000
For METHODFOR TREATING HYPERLIPIDEMI
Art Unit 1653 Examiner MOHAMED, ABDEL
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):
One month (37 CFR 1.17(a)(1))
☐ Two months (37, CFR 1.17(a)(2))
Three months (37 CFR 1.17(a)(3)) \$950
Four months (37 CFR 1.17(a)(4))
☐ Five months (37 CFR 1.17(a)(5)) \$
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-
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☐ A check in the amount of the fee is enclosed.
A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.
Payment by credit card. Form PTO-2038 is attached.  The Director has already been authorized to change fees in this application to a Deposit Account of the Director has already been authorized to change fees in this application to a Deposit Account of the Director has already been authorized to change fees in this application to a Deposit Account of the Director has already been authorized to change fees in this application to a Deposit Account of the Director has already been authorized to change fees in this application to a Deposit Account of the Director has already been authorized to change fees in this application to a Deposit Account of the Director has already been authorized to change fees in this application to a Deposit Account of the Director has already been authorized to change fees in this application to a Deposit Account of the Director has already been authorized to change fees in this application to a Deposit Account of the Director has already been authorized to change fees in this application to a Deposit Account of the Director has a deposit of the
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0590
I have enclosed a duplicate copy of this sheet.
I am the 🔲 applicant/inventor.
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
図. attorney or agent of record.
attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a)
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.
30-Jan-04 Date Signature
(508) 478-0144 Brian R. Morrill, Reg. No. 42,908 Telephone Number Typed or printed name
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.
Total of 6 (six) forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.